U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

National Flood Insurance Program

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

FOR INSURANCE COMPANY USE SECTION A - PROPERTY INFORMATION Policy Number: A1. Building Owner's Name The Housing Authority of the City of Waveland A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or PO. Route and Box No. 529 Camille Circle Company NAIC Number: ZIP Code 39576 City Waveland A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Part of Tax Parcel #162H-0-03-018.00 (building 11) A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) Residential A5. Latitude/Longitude: Lat. 30d17'13 3" Long. 89d22'41.7" Horizontal Datum: NAD 1927 **⋈** NAD 1983 A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance. A7. Building Diagram Number 1A A8. For a building with a crawlspace or enclosure(s): A9. For a building with an attached garage: na a) Square footage of crawlspace or enclosure(s) _ sa ft a) Square footage of attached garage sa ft b) Number of permanent flood openings in the crawlspace b) Number of permanent flood openings in the attached garage na or enclosure(s) within 1.0 foot above adjacent grade within 1.0 foot above adjacent grade na na c) Total net area of flood openings in A8.b sq in Total net area of flood openings in A9.b na sg in d) Engineered flood openings? ☐ Yes d) Engineered flood openings? X No SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION B1. NFIP Community Name & Community Number B2. County Name B3. State Ms Hancock City of Waveland 285262 B7. FIRM Panel Effective/ B9. Base Flood Elevation(s) (Zone B6. FIRM Index Date B8. Flood Zone(s) B4. Map/Panel Number B5. Suffix Revised Date AO, use base flood depth) 28045C0342 10/16/2009 10/16/2009 AE 18 B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9: ☐ FIS Profile B11. Indicate elevation datum used for BFE in Item B9: ☐ NGVD 1929 X NAVD 1988 ☐ Other/Source: B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes X No Designation Date: _____/ ____ CBRS ПОРА SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) ☐ Construction Drawings* C1. Building elevations are based on: ☐ Building Under Construction* □ Finished Construction
 □ *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete Items C2.a-h below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: GPS RTK-Trimble VRS Network Vertical Datum: NAVD 1988 Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☒ NAVD 1988 ☐ Other/Source: _ Datum used for building elevations must be the same as that used for the BFE. Check the measurement used. <u>19</u> . <u>6</u> a) Top of bottom floor (including basement, crawlspace, or enclosure floor) X feet ☐ meters na .__ ☐ meters b) Top of the next higher floor □ feet na . c) Bottom of the lowest horizontal structural member (V Zones only) ☐ feet ☐ meters na ☐ feet ☐ meters d) Attached garage (top of slab) <u>19</u> . <u>5</u> X feet ☐ meters e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) <u>18 . 50</u> X feet ☐ meters f) Lowest adjacent (finished) grade next to building (LAG) 19 00 g) Highest adjacent (finished) grade next to building (HAG) X feet meters h) Lowest adjacent grade at lowest elevation of deck or stairs, including ☐ feet ☐ meters structural support SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001. Were latitude and longitude in Section A provided by a ☑ Check here if comments are provided on back of form. IX Check here if attachments. licensed land surveyor? X Yes П No Certifier's Name License Number 3174 Paul A. Liles Title Company Name Professional Surveyor Machado Patano ZIP Code Address 1641 Popps Ferry Road, Suite A-4 Biloxi MS 39532

06/02/2016

Telephone

(228) 388-1950

MISS

	parresponding information from Section	A.	FOR IN	SURANCE COMPANY USE
PORTANT: In these spaces, copy the	e corresponding information from Section A Unit, Suite, and/or Bldg. No.) or P.O. Route	and Box No.	Policy N	umber:
29 Camille Circle	State Z	IP Code	Compar	ny NAIC Number:
y /aveland	MS	39576	ATION (CONTINU	IED)
CHOTION	D - SURVEYOR, ENGINEER, OR AR	CHITECT CERTIFIC	(2) building owner	JED)
ony both sides of this Elevation Certifi	cate for (1) community official, (2) insuranc	ce agent/company, an	u (3) building owner	
omments C22 - building slab elev	ration. C2e= air conditioner pad. C2f a	and g)=existing grad	des	
GZa = building slab ele.				
			Ti.	
ignature 4 2 / /	\mathcal{A}	Date 06/02/2016		
full a C	VATION INFORMATION (SURVEY NO	T REQUIRED) FOR	R ZONE AO AND	ZONE A (WITHOUT BFE)
				st, complete Sections A, B,and C.
or Zones AO and A (without BFE), com or Items E1–E4, use natural grade, if a	uplete Items E1–E5. If the Certificate is life available. Check the measurement used. In the following and check the appropriate boxes	n Puerto Rico only, ent es to show whether th	er meters. e elevation is above	or below the highest adjacent
arada (UNC) and the lowest dulace	III grade (L. C.).		feet meters	above or below the HAG.
a) Tan of bottom floor (including ba	sement, crawlspace, or enclosure) is		feet meters	above or below the LAG.
			1000	
2. For Building Diagrams 6–9 with pe	rmanent flood openings provided in Section		feet meters	above or below the HAG.
the next higher floor (elevation C2.	b in the diagrams) of the building is		100.	above or below the HAG.
3. Attached garage (top of slab) is	winmont convicing the huilding is		feet ☐ meters [above or below the HAG.
5. Zone AO only: If no flood depth nu ordinance? Yes No	or equipment servicing the building is mber is available, is the top of the bottom Unknown. The local official must certify this	s information in Section		
SECTION	N F – PROPERTY OWNER (OR OWN	ER'S REPRESENT	ATIVE) CERTIFIC	ATION
	IZED TENDER OF THE RESERVE OF THE SECTION OF THE SE	e A R and F for Zone	A (WILLIOUL & FLIVIA-1.	ssued or community-issued BFE) 01
Property Owner or Owner's Authorized	Representative's Name			
Floperty Owner or Owner		City	State	ZIP Code
Address		Dato	Telepho	ne
Address Signature		Date	Telepho	ne
Signature		Date	Telepho	ne
		Date	Telepho	
Signature		Date	Telepho	ne □ Check here if attachments.
Signature Comments	OTOTION C. COMMUNITY	INFORMATION (O	PTIONAL)	☐ Check here if attachments.
Signature Comments	SECTION G – COMMUNITY	INFORMATION (OI	PTIONAL)	□ Check here if attachments. Check here if attachments.
Signature Comments The local official who is authorized by G of this Flevation Certificate. Comple	law or ordinance to administer the commun ete the applicable item(s) and sign below. Ch	INFORMATION (OI ity's floodplain manage neck the measurement	PTIONAL) ment ordinance can used in Items G8–G	Check here if attachments. complete Sections A, B, C (or E), and the complete sections A, B, C (or E), and the complete section only, enter meter and survivors engineer, or architemand survivors engineer, or architemand survivors.
Comments The local official who is authorized by G of this Elevation Certificate. Comple G1. The information in Section who is authorized by law to	law or ordinance to administer the communete the applicable item(s) and sign below. Che can taken from other documentation the certify elevation information. (Indicate the control of the	INFORMATION (OI ity's floodplain manage neck the measurement at has been signed a e source and date of t e A (without a FEMA-is	PTIONAL) ment ordinance can used in Items G8–G nd sealed by a licen the elevation data in	Check here if attachments. complete Sections A, B, C (or E), and the section only, enter meter sed surveyor, engineer, or architer the Comments area below.)
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Comments The local official who is authorized by G of this Elevation Certificate. Comple G1. The information in Section who is authorized by law to	law or ordinance to administer the communete the applicable item(s) and sign below. Che can taken from other documentation the certify elevation information. (Indicate the control of the	INFORMATION (OI ity's floodplain manage neck the measurement at has been signed a e source and date of e A (without a FEMA-is floodplain manageme	ement ordinance can used in Items G8–G and sealed by a licen the elevation data ir sued or community-ent purposes.	Check here if attachments. complete Sections A, B, C (or E), and the section only, enter meter sed surveyor, engineer, or architect the Comments area below.)
The local official who is authorized by G of this Elevation Certificate. Comple G1. The information in Section who is authorized by law to G2. A community official comple G3. The following information (I G4. Permit Number	law or ordinance to administer the communete the applicable item(s) and sign below. Check the applicable item(s) and sign below. Check the catelog section information (Indicate the sted Section E for a building located in Zon Items G4–G10) is provided for community G5. Date Permit Issued OCT: New Construction Substant	INFORMATION (OI ity's floodplain manage neck the measurement at has been signed a e source and date of the e A (without a FEMA-is floodplain management G6. Dat tial Improvement	ement ordinance can used in Items G8–G and sealed by a licenthe elevation data in sued or community-ent purposes.	Check here if attachments. complete Sections A, B, C (or E), and 10. In Puerto Rico only, enter meter sed surveyor, engineer, or archite the Comments area below.) ssued BFE) or Zone AO.
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The local official who is authorized by G of this Elevation Certificate. Comple G1. The information in Section who is authorized by law to G2. A community official comple G3. The following information (I G4. Permit Number G7. This permit has been issued for G8. Elevation of as-built lowest floor G9. BFE or (in Zone AO) depth of floor G10. Community's design flood elevation of G10. Community Name	law or ordinance to administer the communete the applicable item(s) and sign below. Check the applicable item(s) and sign below. Check the applicable item(s) and sign below. Check the applicable items of the second information. (Indicate the sted Section E for a building located in Zonditems G4–G10) is provided for community G5. Date Permit Issued Or: New Construction Substantor (including basement) of the building:	INFORMATION (OI ity's floodplain manage neck the measurement at has been signed a e source and date of e A (without a FEMA-is floodplain management G6. Date tial Improvement Title Telephone	ement ordinance can used in Items G8–G and sealed by a licenthe elevation data in sued or community-ent purposes. The Certificate Of Community-feet The meters of the	Check here if attachments. Complete Sections A, B, C (or E), an 10. In Puerto Rico only, enter meters and the Comments area below.) ssued BFE) or Zone AO. Ipliance/Occupancy Issued Datum Datum

BUILDING PHOTOGRAPHS

See Instructions for Item A6.

IMPORTANT: In these spaces, copy to	e corresponding information from Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt. 529 Camille Circle	, Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.	Policy Number:
City Waveland	State ZIP Code MS 39576	Company NAIC Number:

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.

FRONT VIEW 06/01/2016



FEMA Form 086-0-33 (7/12)

Replaces all previous editions.

BUILDING PHOTOGRAPHS

Continuation Page

IMPORTANT: In these spaces, copy to	FOR INSURANCE COMPANY USE		
	Unit, Suite, and/or Bldg. No.) or P.O. Route a		Policy Number:
City Waveland		Code 9576	Company NAIC Number:

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.

REAR VIEW 06/01/2016



FEMA Form 086-0-33 (7/12)

Replaces all previous editions.

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY

ELEVATION CERTIFICATE

IMPORTANT: Follow the instructions on pages 1-9.

OMB No. 1660-0008 Expiration Date: July 31, 2015

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-	SECTIO	N A – PROPI	ERTY INFORMA	TION	FOR INSURANCE COM	IPANY USE
A1.	Building Owner's Name The Housing Authority of the	ne City of W	aveland		Policy Number:	
A2.	Building Street Address (including Apt., Unit, Suite, and/or 529 Camille Circle	r Bldg. No.) or F		1	Company NAIC Number:	
	^{City} Waveland		State MS	Z	ZIP Code 39576	
АЗ.	Property Description (Lot and Block Numbers, Tax Parcel N Part of Tax Parcel #162H-0-03-018.00 (building 11		escription, etc.)			
A4.	Building Use (e.g., Residential, Non-Residential, Addition,	Accessory, etc.)	Residential			
	Latitude/Longitude: Lat. 30d17'13.3"				Datum: 🗌 NAD 1927	➤ NAD 1983
A6. A7.	Attach at least 2 photographs of the building if the Certific Building Diagram Number <u>1A</u>	ate is being us	ed to obtain flood	insurance.		
	For a building with a crawlspace or enclosure(s):		A9. For a	a building with an att	ached garage:	
	a) Square footage of crawlspace or enclosure(s)			Square footage of at		nasq ft
	 Number of permanent flood openings in the crawlspace or enclosure(s) within 1.0 foot above adjacent grade 	e na) (d	Number of permanen within 1.0 foot above	t flood openings in the	attached garage
	c) Total net area of flood openings in A8.b	na		Total net area of floor		nasq in
	d) Engineered flood openings?		d) E	Engineered flood ope	enings? ☐ Yes	⊠ No
	SECTION B - FLOOD	INSURANCE	RATE MAP (FIR	RM) INFORMATIO)N	Santa-Martana School Bloom a garantees and a
B1.	NFIP Community Name & Community Number	B2. Cou	nty Name		B3. Sta	te
	City of Waveland 285262	Hanco			Ms	
В4.	Map/Panel Number B5. Suffix B6. FIRM Index Da		M Panel Effective/ ised Date	B8. Flood Zone(s	B9. Base Flood EI AO, use base	
	28045C0342 D 10/16/2009		10/16/2009	AE	1	8
B10.	Indicate the source of the Base Flood Elevation (BFE) data	The state of the s	The street was a second to the street of the	em B9:		
D11	☐ FIS Profile ☐ FIRM ☐ Community Determined Indicate elevation datum used for BFE in Item B9: ☐	☐ Other/Source NGVD 1929	ce: NAVD 1988	☐ Other/Source		
	Is the building located in a Coastal Barrier Resources Syst					
	Designation Date:/ CBRS		a or othermee rie	10010471104 (0171).		
	SECTION C - BUILDING	ELEVATION I	NEODMATION	(SLIDVEY DEALIIE	DED)	
<u>C1</u>	Building elevations are based on: Construction Dr.		⊠ Building Under			ion
OI.	*A new Elevation Certificate will be required when construction			Construction	Finished Constructi	ION
C2.	Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V	30, V (with BFE), AR, AR/A, AR/A	E, AR/A1-A30, AR/A	H, AR/AO. Complete It	ems
	C2.a-h below according to the building diagram specified i					
	Benchmark Utilized: GPS RTK-Trimble VRS Network		Vertical Datum: N			
	Indicate elevation datum used for the elevations in items a Datum used for building elevations must be the same as t					
	a) Top of bottom floor (including basement, crawlspace, or			ASSESSED AND MARKET AT HIS SOURCE FOR	easurement used.	
	b) Top of the next higher floor	enclosure noor	na .	⊠ feet ☐ feet	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	c) Bottom of the lowest horizontal structural member (V Zo	ones only)	na .	leet		
	d) Attached garage (top of slab)	and the same and the same of t	na	feet		
	e) Lowest elevation of machinery or equipment servicing the		<u> </u>	Ieet	☐ meters	
	(Describe type of equipment and location in Comments f) Lowest adjacent (finished) grade next to building (LAG))	1850	⊠ foot	☐ meters	
	g) Highest adjacent (finished) grade next to building (EAG)		18 . 80			
	h) Lowest adjacent grade at lowest elevation of deck or st		na	THE SHARES	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
	structural support	e de la composition		3 (2000)		
	SECTION D - SURVEYO	OR, ENGINEE	R, OR ARCHITE	CT CERTIFICATION	ON	
This c	ertification is to be signed and sealed by a land surveyor, e	ngineer, or arch	itect authorized by	law to certify elevat	ion	
I unde	ation. I certify that the information on this Certificate repres rstand that any false statement may be punishable by fine o	r imprisonment	under 18 U.S. Cod	le, Section 1001.	499999999999	11 11
		ere latitude and censed land sur		ion A provided by a	AND PERSENSEN PE	ROFESS, O
	er's Name A. Liles		License 3174	Number	Pox	FAL F
Title		Company Name			04/04	12016
Addre		Machado Pata _{City}	State	ZIP Code	U) PS-	3174
1641	Popps Ferry Road, Suite A-4	Biľoxi	MS	39532	TAR THE SECOND	65 111
Signat		Date 04/01/2016	Telephone (228) 38	9 88-1950	OF N	1155151111
			11 /		2000	100000

VATION CERTIFICATE, page 2	I disformation from Section A			FOR INS	SURANCE COMPANY USE
PORTANT: In these spaces, copy the corresp	onding information from Section A.	Box No.		Policy Nu	mber:
PORTANT: In these spaces, copy the correspibling Street Address (including Apt., Unit, Suit 29 Camille Circle	State ZIP C			Company	/ NAIC Number:
y /aveland	MS 395	576		CONTINU	IED)
SECTION D - SUI	RVEYOR, ENGINEER, OR ARCH	ITECT CERT	FICATION (CONTINU	IEU)
both sides of this Flevation Certificate for (1) community official, (2) insurance a	agent/ company	, and (5) band	116	
omments C2a = building slab elevation. C	2e= proposed air conditioner pa	d. C2f and g)	existing gra	ides	
C2a = building slab elevation.	20				
ignature Yaw a.	Da	ote 04/01/201	6 70NF /	AND 7	ONE A (WITHOUT BFE)
SECTION E – BUILDING ELEVATION	INFORMATION (SURVEY NOT	REQUIRED) I	OR ZONE A	AD E reques	st complete Sections A, B, and C
SECTION E – BUILDING ELEVATION or Zones AO and A (without BFE), complete Iter or Items E1–E4, use natural grade, if available 1. Provide elevation information for the following	ms E1-E5. If the Certificate is intend	eu to Support a	enter meters.	etterner 200 Ett	
grade (HAG) and the lowest adjacent grade	crawlspace, or enclosure) is		☐ feet ☐ m	neters \square	above or below the HAG.
b) Top of bottom floor (including basement,	crawlspace, or enclosure) is		☐ feet ☐ m		
O For Building Diagrams 6-9 with permanent	flood openings provided in Section A	Items 8 and/o	r 9 (see pages	neters F	above or below the HAG.
the next higher floor (elevation C2.b in the	diagrams) of the building is		feet In		above or below the HAG.
3. Attached garage (top of slab) is	NY Massaco Referen		□foet □n	neters [above or below the HAG.
E4. Top of platform of machinery and/or equipr	ment servicing the building is		ccordance wit	h the comm	nunity's floodplain management
E5. Zone AO only: If no flood depth number is a ordinance? ☐ Yes ☐ No ☐ Unknown	. The local official must certify this in	formation in Se			
SECTION F - P	ROPERTY OWNER (OR OWNER	'S REPRESE	NTATIVE) C	ERTIFICA	sued or community-issued BFE)
SECTION F - P The property owner or owner's authorized repre Zone AO must sign here. The statements in Se	· lates Continue A	R and F for /	one a (without	t a FEIVIA-IS	sued of community re-
Property Owner or Owner's Authorized Represe	entative's Name				ZID Ondo
Address		City		State	ZIP Code
		Date		Telephor	ne .
Signature					
Comments					Check here if attachment
		TODA/ATION	(OPTIONAL)	
	SECTION G - COMMUNITY IN	FORWIATION	organient ordir	nance can o	complete Sections A, B, C (or E),
The local official who is authorized by law or or G of this Elevation Certificate. Complete the approximately complete the approx	dinance to administer the community's oblicable item(s) and sign below. Chec	k the measuren	nent used in It	ems G8–G2	LO. In Puerto Rico only, enter met
T Ti information in Section C was ta	ken from other documentation that	ind been ag	of the elevati	ion data in	the Comments area below.
G1. The information in Section C was ta who is authorized by law to certify e	elevation information. (Indicate the S	Ource and date	1A-issued or co	ommunity-i	ssued BFE) or Zone AO.
 G1. In the information in Section 9 who is authorized by law to certify e G2. A community official completed Sect G3. The following information (Items G4) 					
G3. The following information (Items G4)	-GIO) is provided for definitions		Date Certifica	ate Of Com	pliance/Occupancy Issued
G4. Permit Number	G5. Date Permit Issued			NOON PROVIDED TO SEE	
G7. This permit has been issued for:	New Construction		☐ feet ☐	meters	Datum
G8 Elevation of as-built lowest floor (includ	ing basement) of the building:			meters	Datum
G9. BFE or (in Zone AO) depth of flooding a	t the building site:] meters	Datum
G10.Community's design flood elevation:	-				
Local Official's Name		Title			
Community Name		Telephone			
Signature		Date			
Comments					
					Check here if attachme
					Replaces all previous ed

FEMA Form 086-0-33 (Revised 7/12)

FE No

.S. DEPARTMENT OF HOMELAND SECURITY EDERAL EMERGENCY MANAGEMENT AGENCY ational Flood Insurance Program	ELEVATION CERTIFICATE IMPORTANT: Follow the instructions on pages 1–9.	OMB No. 1660-0008 Expiration Date: July 31, 2015
		The second party lies

29	Camille	Circle	SECTION	A - PROPE	RTY INFORMA	TION	FOR INSURA	NCE COMPANY USE
	Colline		g Authority of the				Policy Number:	STATE OF THE STATE
A2. R	uilding Street Addres	s (including Apt.,	Unit, Suite, and/or E No.11	Bldg. No.) or P	D. Route and Box	No.	Company NAIC	Number:
72. 0	500 Camille C	Court, Building	No.11		State		ZIP Code 39	576
С	^{ity} Waveland		IN		State MS		393	370
F	Part of Tax Parcel	#162H-0-03-01	mbers, Tax Parcel Nu 8.00					
A4. B	uilding Use (e.g., Re	sidential, Non-Re	sidential, Addition, Ad	ccessory, etc.)	Residential	Llavizanta	Datum: N	IAD 1927 NAD 1983
A	atituda / Langituda: 1	at 30d1/'13 3'	·	LONG. DOUZZ	71./		Datum. LIN	IAD 1921 - 11/10 1000
A6. A	ttach at least 2 phot	ographs of the bu	uilding if the Certifica	ite is being us	ed to obtain nood	msurance.		
A7. B	uilding Diagram Num	nber <u>IA</u>	- locura(s):		A9. For	a building with an a	ttached garage	e:
A8. F	or a building with a c) Square footage of	crawispace or end	iclosure(s)	na	sq ft a)	Square footage of a	attached garage	e <u>na</u> sq f
a h	Number of permar	ent flood opening	gs in the crawlspace	na	b)	Number of permane	ent flood openi	ngs in the attached garag
	or enclosure(s) wit	thin 1.0 foot abov	e adjacent grade	na na		within 1.0 foot about Total net area of flo		
) Total net area of fl			IIa		Engineered flood o		TA9.5 III 34 No
d) Engineered flood		and the second s					
			ION B – FLOOD I			IRM) INFORMAT	ION	B3. State
B1. N	FIP Community Name	e & Community N 285262	lumber	Hanco				Ms
1.00	1ap/Panel Number	B5. Suffix	B6. FIRM Index Dat	Rev	M Panel Effective vised Date		e(s) B9. Bas AO,	e Flood Elevation(s) (Zone use base flood depth) 18
2	28045C0342	D	10/16/2009		10/16/2009	AE		10
B10.I	ndicate the source o	f the Base Flood	Elevation (BFE) data unity Determined	or base flood ☐ Other/Sou	depth entered in rce:	Item B9:		
	☐ FIS Profile			NGVD 1929	⊠ NAVD 1988	☐ Other/Sour	ce:	
B11.I	ndicate elevation da	d in a Coastal Ba	rrier Resources Syst	em (CBRS) are	ea or Otherwise P	rotected Area (OPA)	? Yes	⊠ No
B12.1	s the building locate Designation Date: —	/ / /	/ CBRS	□ OPA				
ı	Designation Date. —		N C – BUILDING	ELEVATION	INFORMATION	SURVEY REQU	JIRED)	- I and a second
					☐ Building Unde			Construction
	Building elevations a *A new Elevation Cei	rtificate will be re	Construction Dr quired when construc	ction of the bu	ilding is complete	2.	/ALL AB/AO C	complete Items
(C2 a-h below accord	ling to the buildin	(with BFE), VE, V1–V g diagram specified i	m item Ar. in	der to mice only,	Circoi inotoro.	/AH, AR/AU. C	ompiete items
	Danahmark Utilizad	GPS RTK-Trin	nble VRS Network		Vertical Datum:	NAVD 1900		
	Indicate elevation da	tum used for the	elevations in items	a) through h) b	elow. NGVD	1929 🛛 NAVD 198	8 Other/S	ource:
9	Datum used for build	ding elevations m	ust be the same as t	that used for t	ne BFE.	Check the	measurement	t used.
			ment, crawlspace, or		40	5 🔀 f		
			intent, crawispace, or	r criorocaro no	na	f	eet 🗌 mete	ers
	b) Top of the next hi	igner illoor	ructural member (V 7	ones only)		🗆 f	eet 🗌 mete	ers
			ructural member (V Z		na	<u> </u>	eet 🗌 mete	ers
	d) Attached garage	of machinery or (equipment servicing	the building	19	5 X f	eet 🔲 mete	ers
	(Describe type of	equipment and le	ocation in Comments	3)			eet 🗌 mete	ere
	f) Lowest adjacent	(finished) grade n	ext to building (LAG)		<u>17</u> . ₋	<u>0</u> ⊠ f 1 ⊠ f	testeetur teripi	
	g) Highest adjacent	(finished) grade	next to building (HAG	i)	200			
	 h) Lowest adjacent structural suppor 		levation of deck or s	stairs, including	<u> </u>		eet 🔲 met	51-5
	- W	SEC	TION D – SURVEY	OR, ENGINE	ER, OR ARCH	ITECT CERTIFICA	ATION	
This	ertification is to be s	ired and coalor	hy a land surveyor	engineer, or a	chitect authorized	d by law to certify ele	evation	
			e punishable by fine	or imprisonme	ent under 18 U.S.	Code, Section 1001.		A Live
ĭ Che	eck here if comment	s are provided on	back of form.	Were latitude a	and longitude in S	section A provided by	/ a	PROFESSION PROFESSION

▼ Check here if attachments.

_ Oncor note in enter-					
Certifier's Name Paul A. Liles		License Nur 3174	mber		
Title Professional Surveyor	Company Name Machado Patano				
Address 1641 Popps Ferry Road, Suite A-4	City Biloxi	State MS	ZIP Code 39532		
Signature Hall A	Date 07/09/2015	Telephone (228) 388	-1950		



	ZIP Code 39576	TIFICATION 1y, and (3) buil	(CONTINU	ny NAIC Number:
State Z MS S URVEYOR, ENGINEER, OR AR r (1) community official, (2) insurance	ZIP Code 39576 CHITECT CER	TIFICATION 1y, and (3) buil	(CONTINU	UED)
MS URVEYOR, ENGINEER, OR AR r (1) community official, (2) insurance	39576 CHITECT CER	TIFICATION ny, and (3) buil	(CONTINU	UED)
URVEYOR, ENGINEER, OR AR r (1) community official, (2) insuran	ce agent/compar	TIFICATION ny, and (3) buil	(CONTINU Iding owner.	UED)
r (1) community official, (2) insuran	ce agent/compar	ny, and (3) bui	lding owner.	
	ä			
pau				
	Date 07/09/20)15		
N INFORMATION (SURVEY NO	OT REQUIRED)	FOR ZONE	AO AND	ZONE A (WITHOUT BFE)
= + == If +b = Cortificato is inte	anded to support	a LUIVIA OF LC	JIVIN-I TEQUE	st, complete Sections A, B, and C.
e. Check the measurement used. In	n Puerto Rico only	y, enter meter	'S.	or below the highest adjacent
ving and check the appropriate boxe	es to show wheth	er the elevation		Of Below the highest days
		☐ feet ☐	meters [above or below the HAG.
b aroudonado or enclosure) is				above or below the LAG.
t flood openings provided in Section	n A Items 8 and/	or 9 (see page	es 8–9 of In	structions),
e diagrams) of the building is			DE A SUBSTITUTE DE LA CONTRACTOR DE LA C	above or below the HAG.
		Manager Manager Control of the Contr		above or below the HAG.
oment servicing the building is		☐ feet ☐		
available is the top of the polloil	11001 elevated iii	accordance w	ith the comr	nunity's 1100uplant management
n. The local official must certify this	s information in S	section a.		
POPERTY OWNER (OR OWN	ER'S REPRES	ENTATIVE)	CERTIFIC/	ATION
Lating who completes Section	SA B and E for	Zone A (withou	ut a FEMA-is	ssued or community-issued BFE) o
Decitions A, B, and I am	the best of my kno	owledge.		
entative's Name				
	City		State	ZIP Code
	Date		Telephor	ne
	14/10/20			
				Check here if attachments
			- 4	
SECTION G - COMMUNITY	INFORMATION	(OPTIONA	L)	A B C (or E) or
				complete Sections A, B, C (or E), and I on Puerto Rico only, enter mete
applicable rem(s) and sign size	20		- Line Licens	and surveyor engineer, or archite
aken from other documentation the	at has been sign	e of the eleva	tion data in	the Comments area below.)
otion E for a building located in Zone	e A (without a FEN	MA-issued or o	community-is	ssued BFE) or Zone AO.
4-G10) is provided for community	1100apiani manag	B		
	G6	. Date Certific	ate Of Com	pliance/Occupancy Issued
1.10		∏feet [☐ meters	Datum
ling basement) of the building: —				Datum
at the building site: —			☐ meters	Datum
		177700000000000000000000000000000000000		
_	71.1			
_	Title			
	Telephone			
	Telephone			
	Telephone			
	ems E1–E5. If the Certificate is intege. Check the measurement used. I ving and check the appropriate boxe (LAG). It, crawlspace, or enclosure) is the common of the building is available, is the top of the bottom. The local official must certify this certifications A, B, and E are correct to the certification information. (Indicate the levation information.)	PROPERTY OWNER (OR OWNER'S REPRES Tresentative who completes Sections A, B, and E are correct to the best of my kn Pentative's Name City Date SECTION G — COMMUNITY INFORMATION City Date Section A or did not be section of my kn City Date City Date	ems E1–E5. If the Certificate is intended to support a Lown of Lee. Check the measurement used. In Puerto Rico only, enter meter ving and check the appropriate boxes to show whether the elevative (LAG).	INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND arems E1—E5. If the Certificate is intended to support a LOMA or LOMR-F requese. Check the measurement used. In Puerto Rico only, enter meters. A ching and check the appropriate boxes to show whether the elevation is above at (LAG). In crawlspace, or enclosure) is